

Application Data Sheet

Application Information

Application number:: Not Yet Assigned
Filing Date:: 03/24/2004
Application Type:: Regular (Continuation Application of 09/712,209)
Subject Matter:: Utility
CD-ROM or CD-R?:: None
Sequence submission?:: None
Computer Readable Form (CRF)?:: No
Title :: APPARATUS AND METHOD FOR ASSAYING
COAGULATION IN FLUID SAMPLES
Attorney Docket Number:: 215105.00608
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 9
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Cindra
Middle Name:: A. Widrig
Family Name:: OPALSKY
City of Residence:: La Jolla
State or Prov. of Residence:: California
Country of Residence:: U.S.A.
Street of mailing address:: 8680-1 Villa La Jolla Drive

City of mailing address::

State or Province of mailing address::

Country of mailing address:: U.S.A.

Postal or Zip Code of mailing address:: 92037

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: David

Middle Name::

Family Name:: OPALSKY

City of Residence:: La Jolla

State or Prov. of Residence:: California

Country of Residence:: U.S.A.

Street of mailing address:: 8680-1 Villa La Jolla Drive

City of mailing address::

State or Province of mailing address::

Country of mailing address:: U.S.A.

Postal or Zip Code of mailing address:: 92037

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Andrezej

Middle Name::

Family Name:: MACZUSZENKO

City of Residence:: Toronto

State or Prov. of Residence:: Ontario

Country of Residence:: Canada

Street of mailing address:: 20 Rowse Circle

City of mailing address:: Toronto
State or Province of mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M9P329

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Imants
Middle Name:: R.
Family Name:: LAUKS
City of Residence:: Rockcliffe Park
State or Prov. of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 218 Coltrin Road
City of mailing address:: Rockcliffe Park
State or Province of mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K1M 0A6

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Rhonda
Middle Name:: J.
Family Name:: CHEADLE
City of Residence:: Kinburn
State or Prov. of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 110 Terraview Drive

City of mailing address:: Kinburn
State or Province of mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of mailing
address:: KOA 2H0

Correspondence Information

Correspondence Customer Number :: 27160

Representative Information

Representative Customer Number:: 27160

Domestic Priority Information

Application ::	Continuity Type::	Parent	Parent Filing Date::
		Application::	
This Application	Non-Provisional	09/712,209	11/15/2000
09/712,209	Non-Provisional	60/164,935	11/15/1999

Foreign Priority Information

Country:: Application number:: Filing Date:: Priority Claimed::

Assignee Information

Assignee name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Postal or Zip Code of mailing address::